# Macan

(Re	equestor's Name)				
(Ad	dress) .				
(Ad	ldress)				
(Cit	ry/State/Zip/Phone	<del>;</del> #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
	<b>.</b>				

Office Use Only



200280124152



01/04/16--01021--003 \*\*160.00

JAN 0 5 2016 S. YOUNG

### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: West Michigan Weaponry LLC	
Name of Limited Liab	oility Company
The enclosed "Application by Foreign Limited Liability Company for Auth Existence, and check are submitted to register the above referenced foreign	
Please return all correspondence concerning this matter to the following:	
John Vandervoort	
Name of Perso	on
West Michigan Weaponry LLC	
Firm/Company	y
15348 Firelight Dr	TALL SECOND
Address	三
Winter Garden, FL 34787	Code Code
City/State and Zip	
jvandervoort@brighthouse.com	innual report notification)
E-mail address: (to be used for future a	nnual report notification)
For further information concerning this matter, please call:	
John Vandervoort at ( 407	793-0450 or 407-347-9112
Name of Contact Person Area	Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	D Filing Fee & S \$160.00 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

(If name unavailable, enter al Liability Company," "L.L.C."	Iternate name adopted for the purpose	of transacting bus	iness in Florida. The alternate in	ame must include "Limited
, ,	or LLC. )	47.000	2504	
<ol> <li>Michigan         (Jurisdiction under the law company is organized)</li> </ol>	of which foreign limited liability	3. <u>47-2309</u>	(FEI number, if applicab	le)
N/A, have not tra	ansacted any business in	Florida		
·	(Date first transacted busines (See sections 605.0904 & 605.0904)	ss in Florida, if prio	or to registration.)	
<sub>5.</sub> 5012 NE 255th D	Dr, Melrose, FL 32666	``		<u></u>
<del></del>	(Street Address of P	rincipal Office)		<del></del>
6. 15348 Firelight D	r, Winter Garden, FL 347	'87		نهند است
				- 1560 SEC
	(Mailing A	Address)		一語当五
7. Name and street addres	ss of Florida registered agent: (P.	O. Box NOT acc	entable)	1000000000000000000000000000000000000
	John Vandervoort			一首 二四
Name:			<del></del>	
Office Address:	15348 Firelight Dr			.000E
	Winter Garden		, Florida 34787	
	(City)		(Zip code)	
Registered agent's accep	tance:			
Having been named as re designated in this applica to complywith the provision	gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the p my position of registered agent.	ment as registere	d agent and agree to act in lete performance of my dut 	this capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of i	gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the p my position of registered agent.  (Registe	ment as registere proper and comp euro ered agent's signatu	d agent and agree to act in lete performance of my dut 	this capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the control of the c	gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the pmy position of registered agent.  (Registered and address of the person(s)	ment as registere proper and comp euro ered agent's signatu	d agent and agree to act in lete performance of my dut 	this capacity. I further agree
designated in this applicate complywith the provision accept the obligations of a second the name. Little or capa John Vandervoort,	gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the pmy position of registered agent.  (Registered and address of the person(s)	enent as registere proper and comp error and comp error agent's signatu who has/have aut	d agent and agree to act in lete performance of my dut 	this capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the same. The name, title or cape John Vandervoort,	gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the pmy position of registered agent.  (Registered agent and address of the person(s)	enent as registere proper and comp error and comp error agent's signatu who has/have aut	d agent and agree to act in lete performance of my dut 	this capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of a Section Vandervoort, 15348 Firelight Dr,	gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the pmy position of registering from (Registerity and address of the person(s)  Sole Member  Winter Garden, FL 34787  of existence, no more than 90 day of which it is organized. (If the/ce	enent as registere proper and compered agent's signatured agent's signatured who has/have aut	d agent and agree to act in lete performance of my dutate.  The performance of my dutate.	this capacity. I further agree ies, and I am familiar with and

Typed or printed name of signee

John Vandervoort

Department of Licensing and Regulatory Affairs Corporations, Securities & Commercial Licensing Bureau, Corporations Division P.O. Box 30054

Lansing, Michigan 48909 Telephone: (517) 241-6470

INVOICE

Invoice: 1358724

Date: 12/08/2015

\*\*\* MAIL \*\*\*

JOHN VANDERVOORT 827 PECORI TERR

OCOEE

FL 34761

Phone:

407 358 8264

Validation:

20919773-1 12/2/15.JMH

ID

DESCRIPTION

OTY

PAGES

E5232E

WEST MICHIGAN WEAPONRY LLC
Good standing certificate

1

10

\*\* NO FEE DUE \*\*

ាល បានប្រជាពលរប្បៈ ប្រជាពលរបស់ ក្រុមមួយរដ្ឋមន្ត្រី សេសក្នុងប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ក្ សម្រេច ប្រជាពលរបស់ ក្នុងប្រជាពលរបស់ ក្រុមមួយរដ្ឋមន្ត្រី ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពល សមានប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស់ ប្រជាពលរបស JAN - L PH 2:58 CRETARY OF STATE LAHASSEE FLORDA

If your order is incorrect, contact this agency immediately at the above address,

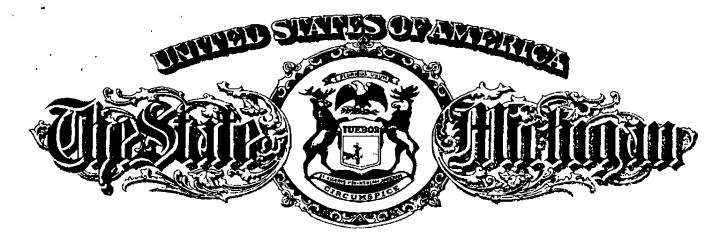
or call (517)241-6470 or fax your concerns to (517)241-0538

MCL 450.1131, MCL 450.4104(5), and MCL 449.48 provide: A photostatic, micrographic,

photographic, optical disc media, or other reproduced copy certified by the administrator,\*

\* which may be sent by facsmile transmission, shall be considered an original for all

purposes and is admissible in evidence in like manner as an original.



# Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

#### WEST MICHIGAN WEAPONRY LLC

was validly organized on November 6, 2014 as a Limited Liability Company. Said Limited

Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 8th day of December, 2015

Julia Dale, Acting Director

Corporations, Securities & Commercial Licensing Bureau